

| United States Bankruptcy Court Northern District of Illinois Eastern Division | | | | Voluntary Petition | |
|--|--|---|---|---|--|
| Name of Debtor (if individual, enter Last, First, Middle): Gilbert, Joseph, A. | | | Name of Joint Debtor (Spouse) (Last, First, Middle): Gilbert, Cindy, Lou | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): | | |
| Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, state all): 1469 | | | Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, state all): 4671 | | |
| Street Address of Debtor (No. & Street, City, and State): 240 Lincoln Downers Grove, IL | | | Street Address of Joint Debtor (No. & Street, City, and State): 240 Lincoln Downers Grove, IL | | |
| ZIP CODE 60515 | | | ZIP CODE 60515 | | |
| County of Residence or of the Principal Place of Business: DuPage | | | County of Residence or of the Principal Place of Business: DuPage | | |
| Mailing Address of Debtor (if different from street address): | | | Mailing Address of Joint Debtor (if different from street address): | | |
| ZIP CODE | | | ZIP CODE | | |
| Location of Principal Assets of Business Debtor (if different from street address above): | | | | | |
| ZIP CODE | | | | | |
| Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) _____ | | Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code.) | | Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts. | |
| Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b) See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | | | Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. ----- Check all applicable boxes <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). | | |
| Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. | | | | THIS SPACE IS FOR COURT USE ONLY | |
| Estimated Number of Creditors 1- 50- 100- 200- 1,000- 5,001- 10,001- 25,001- 50,001- Over 49 99 199 999 5,000 10,000 25,000 50,000 100,000 100,000 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | | |
| Estimated Assets <input type="checkbox"/> \$0 to <input type="checkbox"/> \$10,000 to <input checked="" type="checkbox"/> \$100,000 to <input type="checkbox"/> \$1 million to <input type="checkbox"/> More than \$100 million \$10,000 \$100,000 \$1 million \$100 million | | | | | |
| Estimated Liabilities <input type="checkbox"/> \$0 to <input type="checkbox"/> \$50,000 to <input checked="" type="checkbox"/> \$100,000 to <input type="checkbox"/> \$1 million to <input type="checkbox"/> More than \$100 million \$50,000 \$100,000 \$1 million \$100 million | | | | | |

| | | | |
|--|---------------|--|--|
| Voluntary Petition <i>(This page must be completed and filed in every case)</i> | | Name of Debtor(s): Joseph A. Gilbert, Cindy Lou Gilbert | |
| All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.) | | | |
| Location Where Filed: NONE | Case Number: | Date Filed: | |
| Location Where Filed: | Case Number: | Date Filed: | |
| Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet) | | | |
| Name of Debtor: NONE | Case Number: | Date Filed: | |
| District: | Relationship: | Judge: | |
| <div style="text-align: center; padding: 5px;">Exhibit A</div> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p> | | <div style="text-align: center; padding: 5px;">Exhibit B</div> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> X <u>s/AndrewMCarter</u> Signature of Attorney for Debtor(s) Andrew M. Carter </div> <div style="text-align: right;"> <u>10/21/2009</u> Date 0404578 </div> </div> | |
| Exhibit C | | | |
| Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No | | | |
| Exhibit D | | | |
| <p>(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.</p> <p>If this is a joint petition:</p> <p><input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.</p> | | | |
| Information Regarding the Debtor - Venue (Check any applicable box) | | | |
| <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. | | | |
| <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. | | | |
| <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. | | | |
| Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) | | | |
| <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following). | | | |
| _____ (Name of landlord that obtained judgment) | | | |
| _____ (Address of landlord) | | | |
| <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and | | | |
| <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. | | | |

| | |
|---|---|
| Voluntary Petition <i>(This page must be completed and filed in every case)</i> | Name of Debtor(s): Joseph A. Gilbert, Cindy Lou Gilbert |
| Signatures | |
| <p style="text-align: center;">Signature(s) of Debtor(s) (Individual/Joint)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X s/ Joseph A. Gilbert Signature of Debtor Joseph A. Gilbert</p> <p>X s/ Cindy Lou Gilbert Signature of Joint Debtor Cindy Lou Gilbert</p> <p>_____ Telephone Number (If not represented by attorney) 10/21/2009 Date</p> | <p style="text-align: center;">Signature of a Foreign Representative</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of Title 11, United States Code. Certified Copies of the documents required by § 1515 of title 11 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the Chapter of title 11 specified in the petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X Not Applicable (Signature of Foreign Representative)</p> <p>_____ (Printed Name of Foreign Representative)</p> <p>_____ Date</p> |
| <p style="text-align: center;">Signature of Attorney</p> <p>X s/AndrewMCarter Signature of Attorney for Debtor(s)</p> <p>Andrew M. Carter Bar No. 0404578 Printed Name of Attorney for Debtor(s) / Bar No.</p> <p>Law Office of Andrew M. Carter Firm Name</p> <p>127 W. Willow Avenue Wheaton, IL 60187 Address</p> <p>_____ 630-462-8071 630-462-0342 Telephone Number</p> <p>10/21/2009 Date</p> | <p style="text-align: center;">Signature of Non-Attorney Petition Preparer</p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.</p> <p>Not Applicable Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social Security number(If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. 110.)</p> <p>_____ Address</p> <p>_____ X Not Applicable</p> <p>_____ Date</p> <p>Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.</p> <p>Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.</i></p> |
| <p style="text-align: center;">Signature of Debtor (Corporation/Partnership)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X Not Applicable Signature of Authorized Individual</p> <p>_____ Printed Name of Authorized Individual</p> <p>_____ Title of Authorized Individual</p> <p>_____ Date</p> | |

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re: Joseph A. Gilbert Cindy Lou Gilbert
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the **180 days before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]* _____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

Official Form 1, Exh. D (10/06) – Cont.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. ' 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: s/ Joseph A. Gilbert
Joseph A. Gilbert

Date: 10/21/2009

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re: Joseph A. Gilbert Cindy Lou Gilbert
Debtor(s)

Case No. _____
(if known)

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CREDIT COUNSELING REQUIREMENT**

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Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the **180 days before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]* _____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

Official Form 1, Exh. D (10/06) – Cont.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. ' 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: **s/ Cindy Lou Gilbert**
Cindy Lou Gilbert

Date: **10/21/2009**

FORM B6A
(10/05)

In re: Joseph A. Gilbert Cindy Lou Gilbert,
Debtors

Case No. _____
(If known)

SCHEDULE A - REAL PROPERTY

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--|--|--------------------------------------|--|-------------------------------|
| 240 Lincoln Downers Grove, IL 60515 | Fee Owner | | \$ 206,000.00 | \$ 209,600.00 |
| Total ➤ | | | \$ 206,000.00 | |

(Report also on Summary of Schedules.)

FormB6B
(10/05)

In re Joseph A. Gilbert Cindy Lou Gilbert, Case No. _____
Debtors (If known)

SCHEDULE B - PERSONAL PROPERTY

| TYPE OF PROPERTY | NONE | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------|---|-----------------------------------|--|
| 1. Cash on hand | | None | | 0.00 |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Checking Account at U.S. Bank in Downers Grove, IL, Joint Checking Account | J | 200.00 |
| Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Joint Checking account at U.S. Bank in Downers Grove, IL | J | 200.00 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | | None | | 0.00 |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | | Four (4) Dressers (\$135.00); Three (3) Beds (\$40.00), Two (2) Televisions (\$20.00), Entertainment Center (\$10.00), Two (2) Sofas (\$20.00), Loveseat (\$5.00), Buffet (\$15.00), Kitchen Set (\$25.00), Refrigerator (\$10.00), Oven/Range (\$100.00), Microwave (\$10.00); Laptop Computer (\$50.00), Stereo Set (\$5.00); all located at 240 Lincoln, Downers Grove, IL 60515 | J | 445.00 |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | | None | | 0.00 |
| 6. Wearing apparel. | | Normal Wearing Apparel; located at 240 Lincoln | J | 100.00 |
| 7. Furs and jewelry. | | None | | 0.00 |
| 8. Firearms and sports, photographic, and other hobby equipment. | | None | | 0.00 |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | Term Life Insurance Policy | W | 0.00 |
| Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | Term Life Insurance Policy from State Farm | H | 0.00 |
| 10. Annuities. Itemize and name each issuer. | | None | | 0.00 |
| | | | | |

Form B6B-Cont.
(10/05)

In re **Joseph A. Gilbert Cindy Lou Gilbert**

Case No. _____

Debtors

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY | NONE | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|----------|---|-----------------------------------|--|
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)). | | Illinois Municipal Retirement Fund | W | 10,000.00 |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give Particulars. | | None | W | 0.00 |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | | None | W | 0.00 |
| 14. Interests in partnerships or joint ventures. Itemize. | | None | W | 0.00 |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | | None | W | 0.00 |
| 16. Accounts receivable. | | None | W | 0.00 |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | | None | W | 0.00 |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars. | | None | W | 0.00 |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | | None | W | 0.00 |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | | None | W | 0.00 |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | | None | W | 0.00 |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | | None | W | 0.00 |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | | None | W | 0.00 |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | 1994 Ford Taurus | J | 0.00 |

Form B6B-Cont.
(10/05)

In re **Joseph A. Gilbert Cindy Lou Gilbert**
Debtors

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY | NONE | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------|--------------------------------------|-----------------------------------|--|
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | 2003 Chevy Cavalier | J | 2,000.00 |
| Automobiles, trucks, trailers, and other vehicles and accessories. | | 2007 Honda Pilot | J | 13,600.00 |
| 26. Boats, motors, and accessories. | | None | J | 0.00 |
| 27. Aircraft and accessories. | | None | J | 0.00 |
| 28. Office equipment, furnishings, and supplies. | | None | J | 0.00 |
| 29. Machinery, fixtures, equipment and supplies used in business. | | None | J | 0.00 |
| 30. Inventory. | | None | J | 0.00 |
| 31. Animals. | | None | J | 0.00 |
| 32. Crops - growing or harvested. Give particulars. | | None | J | 0.00 |
| 33. Farming equipment and implements. | | None | J | 0.00 |
| 34. Farm supplies, chemicals, and feed. | | None | J | 0.00 |
| 35. Other personal property of any kind not already listed. Itemize. | | None | J | 0.00 |
| <div style="display: flex; justify-content: space-between; align-items: center;"> <u>2</u> continuation sheets attached Total > </div> | | | | \$ 26,545.00 |

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

Official Form 6C (04/07)

In re Joseph A. Gilbert Cindy Lou Gilbert
DebtorsCase No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:
(Check one box)☐ 11 U.S.C. § 522(b)(2)☒ 11 U.S.C. § 522(b)(3)☐ Check if debtor claims a homestead exemption that exceeds
\$136,875

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|---|--|------------------------------------|---|
| 2007 Honda Pilot | 735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b) | 4,400.00 7,800.00 | 13,600.00 |
| 240 Lincoln Downers Grove, IL 60515 | 735 ILCS 5/12-901 | 30,000.00 | 206,000.00 |
| Checking Account at U.S. Bank in Downers Grove, IL, Joint Checking Account | 735 ILCS 5/12-1001(b) | 200.00 | 200.00 |
| Illinois Municipal Retirement Fund | 40 ILCS 5/7-217 | 10,000.00 | 10,000.00 |
| Joint Checking account at U.S. Bank in Downers Grove, IL | 735 ILCS 5/12-1001(b) | 200.00 | 200.00 |

Official Form 6D (10/06)

In re Joseph A. Gilbert Cindy Lou Gilbert,
Debtors

Case No. _____
(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.) | CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|--|--|------------|--------------|----------|---|---------------------------|
| ACCOUNT NO. 2002470801-6 Citi Mortgage P.O. Box 183040, Columbus, OH 43218-3040 | | Mortgage 240 Lincoln, Downers Grove, IL 60515 VALUE \$206,000.00 | | | | 165,900.00 | 40,100.00 |
| ACCOUNT NO. 511546821 U.S. Bank 69th & Belmont, Downers Grove, IL 60510 | | Mortgage 240 Lincoln, Downers Grove, IL 60515 VALUE \$206,000.00 | | | | 43,700.00 | 162,300.00 |

0 continuation sheets
attached

Subtotal >
(Total of this page)

Total >
(Use only on last page)

| | |
|---------------|---------------|
| \$ 209,600.00 | \$ 202,400.00 |
| \$ 209,600.00 | \$ 202,400.00 |

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

Official Form 6E (04/07)

In re Joseph A. Gilbert Cindy Lou Gilbert

Debtors

Case No. _____

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Official Form 6E (04/07) - Cont.

In re Joseph A. Gilbert Cindy Lou Gilbert,
Debtors

Case No. _____
(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM | AMOUNT ENTITLED TO PRIORITY | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|-----------------------------------|---|
| ACCOUNT NO. | | | | | | | | | |

Sheet no. 1 of 1 continuation sheets attached to Schedule of
Creditors Holding Priority Claims

Subtotals>
(Totals of this page)

| | | | | | |
|----|------|----|------|----|------|
| \$ | 0.00 | \$ | 0.00 | \$ | 0.00 |
| \$ | 0.00 | | | | |
| | | \$ | 0.00 | \$ | 0.00 |

Total >
(Use only on last page of the completed
Schedule E. Report also on the Summary of
Schedules.)

Total >
(Use only on last page of the completed
Schedule E. If applicable, report also on the
Statistical Summary of Certain Liabilities
and Related Data.)

Official Form 6F (10/06)

In re **Joseph A. Gilbert Cindy Lou Gilbert**
Debtors

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|--|---|------------|--------------|----------|--------------------|
| ACCOUNT NO. 38831847 Avenue Credit Card C/O Asset Acceptance, LLC P.O. Box 2036 Warren, Michigan 4806 | J | Revolving Charge Card | | | | 330.00 |
| ACCOUNT NO. 1059937 Cach, LLC C/O Adler & Associates 25 E. Washington Street, Suite 500 Chicago, IL 60602 | J | Revolving Charge Card | | | | 9,700.00 |
| ACCOUNT NO. 0000001153673101 Carsons C/O National Action 165 Lawrence Bell Dr., Suite 100 Williamsville, NY 14221 | J | Revolving Charge Card | | | | 860.00 |
| ACCOUNT NO. 2112110100012556 Carsons C/O MJ Hecker Associate's, PC P.O. Box 505 Linden, MI 48457 | J | Revolving Charge Card | | | | 750.00 |
| ACCOUNT NO. 5424-1807-5320-4681 Citi Bank (South Dakota) N.A. C/O Blat, Hasmillier, Leibster & Moor 125 S. Wacker Drive, Suite 400 Chicago, IL 60606 | J | Revolving Charge Card | | | | 3,100.00 |

2 Continuation sheets attached

| | |
|------------|---------------------|
| Subtotal > | \$ 14,740.00 |
| Total > | \$ |

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re **Joseph A. Gilbert Cindy Lou Gilbert**
Debtors

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|--|---|------------|--------------|----------|--------------------|
| ACCOUNT NO. 31860467103 Direct Loans U.S. Department of Education Applicant Services P.O. Box 5691 Montgomery, AL 36103-5691 | W | Student Loans | | | | 25,037.56 |
| ACCOUNT NO. 5268 Discover Bank C/O Baker & Miller 29 Wacker Drive, 5th Floor Chicago, IL 60606 | J | Revolving Charge Card | | | | 6,500.00 |
| ACCOUNT NO. 7658824 DuPage Credit Union P.O. Box 3930 Naperville, IL 60567 | J | Revolving Charge Card | | | | 14,300.00 |
| ACCOUNT NO. 091523408 DuPage Medical Group C/O Merchant's Credit Guide Co. 223 W. Jackson Chicago, IL 60606 | J | Medical Services 09/07/09 | | | | 9,600.00 |
| ACCOUNT NO. _____ Good Samaritan Hospital 3815 Highland Ave Downers Grove, IL 60515 | J | Medical Services dated 6/21/07 | | | | 505.00 |

Sheet no. 1 of 2 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

| | |
|------------|---------------------|
| Subtotal > | \$ 55,942.56 |
| Total > | \$ |

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

Official Form 6F (10/06) - Cont.

In re **Joseph A. Gilbert Cindy Lou Gilbert**
Debtors

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|---|---|------------|--------------|----------|--------------------|
| ACCOUNT NO. 10026626 Loyola University Physician's Group C/O ICS P.O. Box 1010 Tinley Park, IL 60477 | J | Medical Services dated 2/15/07 | | | | 230.00 |
| ACCOUNT NO. MPAS-053844 Midwest Pulmonary Associates C/O ABC Credit & Recovery Services P.O. Box 3722 Lisle, IL 60532 | H | Medical Services | | | | 66.00 |
| ACCOUNT NO. 1969551 Riverwalk Holdings, Ltd C/O CACI P.O. Box 1022 Wixom, MI 48393-1022 | J | Revolving Charge Card | | | | 1,200.00 |
| ACCOUNT NO. GILC1000 Smith-Perry Eye Center C/O FFCC-Columbus Inc P.O. Box 20790 Columbus, OH 43220-0790 | W | March 23, 2009 Eye Care Services | | | | 200.00 |
| ACCOUNT NO. GILJ0002 Smith-Perry Eye Center C/O FFCC-Columbus, Inc. P.O. Box 20790 Columbus, OH 43220-0790 | H | March 23, 2009 Eye Care Services | | | | 170.00 |

Sheet no. 2 of 2 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

| | | | |
|----------|---|----|------------------|
| Subtotal | > | \$ | 1,866.00 |
| Total | > | \$ | 72,548.56 |

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

Andrew M. Carter 0404578
Law Office of Andrew M. Carter
127 W. Willow Avenue
Wheaton, IL 60187

630-462-8071
Attorney for the Petitioner(s)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

Eastern Division

In Re:

Debtor: **Joseph A. Gilbert**

Social Security Number: **1469**

Case No:

Chapter **7**

Joint Debtor: **Cindy Lou Gilbert**

Social Security Number: **4671**

Numbered Listing of Creditors

| Creditor name and mailing address | Category of Claim | Amount of Claim |
|--|-------------------------|--------------------|
| 1. Avenue Credit Card C/O Asset Acceptance, LLC P.O. Box 2036 Warren, Michigan 4806 | Unsecured Claims | \$ 330.00 |
| 2. Cach, LLC C/O Adler & Associates 25 E. Washington Street, Suite 500 Chicago, IL 60602 | Unsecured Claims | \$ 9,700.00 |
| 3. Carsons C/O National Action 165 Lawrence Bell Dr., Suite 100 Williamsville, NY 14221 | Unsecured Claims | \$ 860.00 |
| 4. Carsons C/O MJ Hecker Associate's, PC P.O. Box 505 Linden, MI 48457 | Unsecured Claims | \$ 750.00 |
| 5. Citi Bank (South Dakota) N.A. C/O Blat, Hasmliller, Leibster & Moor 125 S. Wacker Drive, Suite 400 Chicago, IL 60606 | Unsecured Claims | \$ 3,100.00 |

In re: **Joseph A. Gilbert**
Cindy Lou Gilbert

Case No. _____

| | | | |
|-----|---|-------------------------|----------------------|
| 6. | Citi Mortgage P.O. Box 183040, Columbus, OH 43218-3040 | Secured Claims | \$ 165,900.00 |
| 7. | Direct Loans U.S. Department of Education Applicant Services P.O. Box 5691 Montgomery, AL 36103-5691 | Unsecured Claims | \$ 25,037.56 |
| 8. | Discover Bank C/O Baker & Miller 29 Wacker Drive, 5th Floor Chicago, IL 60606 | Unsecured Claims | \$ 6,500.00 |
| 9. | DuPage Credit Union P.O. Box 3930 Naperville, IL 60567 | Unsecured Claims | \$ 14,300.00 |
| 10. | DuPage Medical Group C/O Merchant's Credit Guide Co. 223 W. Jackson Chicago, IL 60606 | Unsecured Claims | \$ 9,600.00 |
| 11. | Good Samaritan Hospital 3815 Highland Ave Downers Grove, IL 60515 | Unsecured Claims | \$ 505.00 |
| 12. | Loyola University Physician's Group C/O ICS P.O. Box 1010 Tinley Park, IL 60477 | Unsecured Claims | \$ 230.00 |
| 13. | Midwest Pulmonary Associates C/O ABC Credit & Recovery Services P.O. Box 3722 Lisle, IL 60532 | Unsecured Claims | \$ 66.00 |
| 14. | Riverwalk Holdings, Ltd C/O CACI P.O. Box 1022 Wixom, MI 48393-1022 | Unsecured Claims | \$ 1,200.00 |

In re: **Joseph A. Gilbert**
Cindy Lou Gilbert

Case No. _____

- | | | | |
|-----|--|-------------------------|---------------------|
| 15. | Smith-Perry Eye Center C/O FFCC-Columbus, Inc. P.O. Box 20790 Columbus, OH 43220-0790 | Unsecured Claims | \$ 170.00 |
| 16. | Smith-Perry Eye Center C/O FFCC-Columbus Inc P.O. Box 20790 Columbus, OH 43220-0790 | Unsecured Claims | \$ 200.00 |
| 17. | U.S. Bank 69th & Belmont, Downers Grove, IL 60510 | Secured Claims | \$ 43,700.00 |

In re: **Joseph A. Gilbert**
Cindy Lou Gilbert

Case No. _____

(The penalty for making a false statement or concealing property is a fine up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. secs. 152 and 3571.)

DECLARATION

I, **Joseph A. Gilbert**, and I, **Cindy Lou Gilbert**, named as debtors in this case, declare under penalty of perjury that we have read the foregoing Numbered Listing of Creditors, consisting of **3 sheets** (not including this declaration), and that it is true and correct to the best of our information and belief.

Signature: **s/ Joseph A. Gilbert**
Joseph A. Gilbert

Dated: **10/21/2009**

Signature: **s/ Cindy Lou Gilbert**
Cindy Lou Gilbert

Dated: **10/21/2009**

Form B6G

(10/05)

In re: Joseph A. Gilbert Cindy Lou Gilbert,
Debtors

Case No. _____
(If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

☐ Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|---|---|
| None | |

Form B6H

(10/05)

In re: **Joseph A. Gilbert Cindy Lou Gilbert**
Debtors

Case No. _____
(If known)

SCHEDULE H - CODEBTORS

☒ Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|------------------------------|------------------------------|

In re **Joseph A. Gilbert Cindy Lou Gilbert**

Case No. _____

Debtors

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

| | | |
|---|--|---|
| Debtor's Marital Status: Married | DEPENDENTS OF DEBTOR AND SPOUSE | |
| | RELATIONSHIP(S): | AGE(S): |
| Employment: | DEBTOR | SPOUSE |
| Occupation | Driver | Administrative Assistant |
| Name of Employer | Lee Auto Parts | Downers Grove Grade School District 58 |
| How long employed | 1.5 years | 6 years |
| Address of Employer | 406 Ogden Ave Downers Grove, IL 60515 | 1860 63rd Street Downers Grove, IL 60516 |

INCOME: (Estimate of average or projected monthly income at time case filed)

DEBTOR

SPOUSE

1. Monthly gross wages, salary, and commissions
(Prorate if not paid monthly.)

\$ 680.00 \$ 2,120.00

2. Estimate monthly overtime

\$ 0.00 \$ 0.00

3. SUBTOTAL

\$ 680.00 \$ 2,120.00

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

\$ 68.00 \$ 251.20

b. Insurance

\$ 0.00 \$ 29.32

c. Union dues

\$ 0.00 \$ 0.00

d. Other (Specify) **IMRF**

\$ 0.00 \$ 95.48

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ 68.00 \$ 376.00

6. TOTAL NET MONTHLY TAKE HOME PAY

\$ 612.00 \$ 1,744.00

7. Regular income from operation of business or profession or farm
(Attach detailed statement)

\$ 0.00 \$ 0.00

8. Income from real property

\$ 0.00 \$ 0.00

9. Interest and dividends

\$ 0.00 \$ 0.00

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.

\$ 0.00 \$ 0.00

11. Social security or other government assistance
(Specify) **1,282.00**

\$ 1,282.00 \$ 0.00

12. Pension or retirement income

\$ 0.00 \$ 0.00

13. Other monthly income

(Specify) _____ \$ 0.00 \$ 0.00

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ 1,282.00 \$ 0.00

15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

\$ 1,894.00 \$ 1,744.00

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)

\$ 3,638.00

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document.:

NONE

Official Form 6J (10/06)

In re Joseph A. Gilbert Cindy Lou Gilbert

Debtors

Case No. _____
(If known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

| | | |
|--|----|-----------------|
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | <u>1,413.00</u> |
| a. Are real estate taxes included? Yes _____ No <u>✓</u> | | |
| b. Is property insurance included? Yes _____ No <u>✓</u> | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | <u>115.00</u> |
| b. Water and sewer | \$ | <u>75.00</u> |
| c. Telephone | \$ | <u>90.00</u> |
| d. Other _____ | \$ | <u>0.00</u> |
| 3. Home maintenance (repairs and upkeep) | \$ | <u>150.00</u> |
| 4. Food | \$ | <u>600.00</u> |
| 5. Clothing | \$ | <u>150.00</u> |
| 6. Laundry and dry cleaning | \$ | <u>20.00</u> |
| 7. Medical and dental expenses | \$ | <u>230.00</u> |
| 8. Transportation (not including car payments) | \$ | <u>100.00</u> |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | <u>10.00</u> |
| 10. Charitable contributions | \$ | <u>0.00</u> |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | <u>0.00</u> |
| b. Life | \$ | <u>0.00</u> |
| c. Health | \$ | <u>0.00</u> |
| d. Auto | \$ | <u>375.00</u> |
| e. Other _____ | \$ | <u>0.00</u> |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | | |
| (Specify) _____ | \$ | <u>0.00</u> |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | \$ | <u>0.00</u> |
| b. Other <u>Student Loans for Children/Direct Loans</u> | \$ | <u>285.00</u> |
| 14. Alimony, maintenance, and support paid to others | \$ | <u>0.00</u> |
| 15. Payments for support of additional dependents not living at your home | \$ | <u>0.00</u> |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | <u>0.00</u> |
| 17. Other _____ | \$ | <u>0.00</u> |

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

| | |
|----|-----------------|
| \$ | <u>3,613.00</u> |
|----|-----------------|

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

20. STATEMENT OF MONTHLY NET INCOME

| | | |
|--|----|-----------------|
| a. Average monthly income from Line 15 of Schedule I | \$ | <u>3,638.00</u> |
| b. Average monthly expenses from Line 18 above | \$ | <u>3,613.00</u> |
| c. Monthly net income (a. minus b.) | \$ | <u>25.00</u> |

Official Form 6 - Statistical Summary (10/06)

**United States Bankruptcy Court
Northern District of Illinois
Eastern Division**

In re **Joseph A. Gilbert Cindy Lou Gilbert**

Debtors

Case No. _____

Chapter **7****STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 25,037.56 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E. | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 25,037.56 |

State the following:

| | |
|---|-------------|
| Average Income (from Schedule I, Line 16) | \$ 3,638.00 |
| Average Expenses (from Schedule J, Line 18) | \$ 3,613.00 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20) | \$ 3,670.10 |

State the following:

| | | |
|--|---------|--------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$202,400.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$0.00 |
| 4. Total from Schedule F | | \$72,548.56 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$274,948.56 |

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re: **Joseph A. Gilbert**

Cindy Lou Gilbert

Case No. _____

Chapter **7**

BUSINESS INCOME AND EXPENSES

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:

1. Gross Income For 12 Months Prior to Filing: \$ 0.00

PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

2. Gross Monthly Income: \$ 0.00

PART C - ESTIMATED FUTURE MONTHLY EXPENSES:

| | |
|---|----------------|
| 3. Net Employee Payroll (Other Than Debtor) | \$ <u>0.00</u> |
| 4. Payroll Taxes | <u>0.00</u> |
| 5. Unemployment Taxes | <u>0.00</u> |
| 6. Worker's Compensation | <u>0.00</u> |
| 7. Other Taxes | <u>0.00</u> |
| 8. Inventory Purchases (Including raw materials) | <u>0.00</u> |
| 9. Purchase of Feed/Fertilizer/Seed/Spray | <u>0.00</u> |
| 10. Rent (Other than debtor's principal residence) | <u>0.00</u> |
| 11. Utilities | <u>0.00</u> |
| 12. Office Expenses and Supplies | <u>0.00</u> |
| 13. Repairs and Maintenance | <u>0.00</u> |
| 14. Vehicle Expenses | <u>0.00</u> |
| 15. Travel and Entertainment | <u>0.00</u> |
| 16. Equipment Rental and Leases | <u>0.00</u> |
| 17. Legal/Accounting/Other Professional Fees | <u>0.00</u> |
| 18. Insurance | <u>0.00</u> |
| 19. Employee Benefits (e.g., pension, medical, etc.) | <u>0.00</u> |
| 20. Payments to Be Made Directly By Debtor to Secured Creditors For | |

Pre-Petition Business Debts (Specify):

None

21. Other (Specify):

None

22. Total Monthly Expenses (Add items 3 - 21) \$ 0.00

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract Item 22 from Item 2) \$ 0.00

Official Form 6 - Summary (10/06)

United States Bankruptcy Court
Northern District of Illinois
Eastern Division

In re Joseph A. Gilbert Cindy Lou Gilbert,
Debtors

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|---------------|---------------|---------------|-------------|
| A - Real Property | YES | 1 | \$ 206,000.00 | | |
| B - Personal Property | YES | 3 | \$ 26,545.00 | | |
| C - Property Claimed as Exempt | YES | 1 | | | |
| D - Creditors Holding Secured Claims | YES | 1 | | \$ 209,600.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | YES | 2 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | YES | 3 | | \$ 72,548.56 | |
| G - Executory Contracts and Unexpired Leases | YES | 1 | | | |
| H - Codebtors | YES | 1 | | | |
| I - Current Income of Individual Debtor(s) | YES | 1 | | | \$ 3,638.00 |
| J - Current Expenditures of Individual Debtor(s) | YES | 2 | | | \$ 3,613.00 |
| TOTAL | | 16 | \$ 232,545.00 | \$ 282,148.56 | |

Official Form 6 - Declaration (10/06)

In re Joseph A. Gilbert Cindy Lou Gilbert
Debtors

Case No. _____
(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **18** sheets (*total shown on summary page plus 2*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: **10/21/2009** _____

Signature: **s/ Joseph A. Gilbert**
Joseph A. Gilbert
Debtor

Date: **10/21/2009** _____

Signature: **s/ Cindy Lou Gilbert**
Cindy Lou Gilbert
(Joint Debtor, if any)

[If joint case, both spouses must sign]

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

(NOT APPLICABLE)

Official Form 7
(04/07)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re: **Joseph A. Gilbert Cindy Lou Gilbert**

Debtors

Case No. _____

(If known)

STATEMENT OF FINANCIAL AFFAIRS

1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE | FISCAL YEAR PERIOD |
|-----------|--|--------------------|
| 5,000.00 | Lee Auto Parts (Joe) | 2007 |
| 24,000.00 | Downers Grove Grade School District 58 (Cindy) | 2007 |
| 25,000.00 | Downers Grove Grade School District 58 (Cindy) | 2008 |
| 5,000.00 | Lee Auto Parts (Joe) | 2008 |

2. Income other than from employment or operation of business

None ☐ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE | FISCAL YEAR PERIOD |
|-----------|-------------------------------------|--------------------|
| 15,000.00 | Social Security Administration(Joe) | 2007 |
| 15,300.00 | Social Security Administration | 2008 |

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None

☐

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS | AMOUNT PAID | AMOUNT STILL OWING |
|---|---|-----------------|-----------------------|
| City Mortgage, Inc. P.O. Box 183040 Columbus, OH 43218-3040 | 07/05/09; 08/05/09; 09/05/09; | 3,342.00 | 165, 900.00 |
| Direct Loans U.S. Department of Education Applicant Services P/O. Box 5691 Montgomery, AL 36103-5691 | 8/05/09: \$282.00 9/05/09: \$282.00 10/05/09: \$282.00 | 846.00 | 24,191.56 |
| U.S. Bank 63rd and Belmont Downers Grove, IL 60516 | 07/05/09; 08/05/09; 09/05/09 | 900.00 | 43,700.00 |

None

☐

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS/ TRANSFERS | AMOUNT PAID OR VALUE OF TRANSFERS | AMOUNT STILL OWING |
|------------------------------|------------------------------------|--|--------------------------|
|------------------------------|------------------------------------|--|--------------------------|

None

None

☐

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR | DATES OF PAYMENTS | AMOUNT PAID | AMOUNT STILL OWING |
|--|----------------------|-------------|-----------------------|
|--|----------------------|-------------|-----------------------|

None

4. Suits and administrative proceedings, executions, garnishments and attachments

None

☐

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| CAPTION OF SUIT AND CASE NUMBER | NATURE OF PROCEEDING | COURT OR AGENCY AND LOCATION | STATUS OR DISPOSITION |
|---|----------------------------------|------------------------------------|--------------------------|
| Discover Bank vs. Gilbert 09 SR 1837 | Collection on Credit Card | DuPage County Circuit Court | Pending |
| City Bank (South Dakota), N.A. vs Gilbert 09 SC 5781 | Collection on Credit Card | DuPage County Circuit Court | Pending |
| Cach, LLC vs Gilbert 09 SR 1902 | Collection on Credit Card | DuPage County Circuit Court | Pending |

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

☐

| NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED | DATE OF SEIZURE | DESCRIPTION AND VALUE OF PROPERTY |
|--|--------------------|---|
|--|--------------------|---|

None

5. Repossessions, foreclosures and returns

None

☐

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR OR SELLER | DATE OF REPOSSESSION, FORECLOSURE SALE TRANSFER OR RETURN | DESCRIPTION AND VALUE OF PROPERTY |
|---|---|---|
|---|---|---|

None

6. Assignments and receiverships

None

☐

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF ASSIGNEE | DATE OF ASSIGNMENT | TERMS OF ASSIGNMENT OR SETTLEMENT |
|---------------------------------|-----------------------|---|
|---------------------------------|-----------------------|---|

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

☐

| NAME AND ADDRESS OF CUSTODIAN | NAME AND ADDRESS OF COURT CASE TITLE & NUMBER | DATE OF ORDER | DESCRIPTION AND VALUE OF PROPERTY |
|----------------------------------|---|------------------|---|
|----------------------------------|---|------------------|---|

None

7. Gifts

None

☐

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON OR ORGANIZATION | RELATIONSHIP TO DEBTOR, IF ANY | DATE OF GIFT | DESCRIPTION AND VALUE OF GIFT |
|--|--------------------------------------|-----------------|-------------------------------------|
|--|--------------------------------------|-----------------|-------------------------------------|

None

8. Losses

None

☐

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION AND VALUE OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS | DATE OF LOSS |
|---|--|-----------------|
|---|--|-----------------|

None

9. Payments related to debt counseling or bankruptcy

None

☐

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE | DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|--|---|--|
| Law Office of Andrew M. Carter 127 W. Willow Ave Wheaton, IL 60187 | 10/2/09 | \$500.00 |

10. Other transfers

None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR | DATE | DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED |
|---|------|--|
|---|------|--|

None

None



b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

| NAME OF TRUST OR OTHER DEVICE | DATE(S) OF TRANSFER(S) | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY |
|----------------------------------|---------------------------|---|
|----------------------------------|---------------------------|---|

None

11. Closed financial accounts

None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE OR CLOSING |
|------------------------------------|--|--|
|------------------------------------|--|--|

None

12. Safe deposit boxes

None ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY | NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY | DESCRIPTION OF CONTENTS | DATE OF TRANSFER OR SURRENDER, IF ANY |
|--|---|-------------------------------|---|
|--|---|-------------------------------|---|

None

13. Setoffs

None ☐ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATE OF SETOFF | AMOUNT OF SETOFF |
|------------------------------|-------------------|---------------------|
|------------------------------|-------------------|---------------------|

None

14. Property held for another person

None ☐ List all property owned by another person that the debtor holds or controls.

| NAME AND ADDRESS OF OWNER | DESCRIPTION AND VALUE OF PROPERTY | LOCATION OF PROPERTY |
|------------------------------|--------------------------------------|----------------------|
|------------------------------|--------------------------------------|----------------------|

None

15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

| ADDRESS | NAME USED | DATES OF OCCUPANCY |
|---------|-----------|--------------------|
|---------|-----------|--------------------|

None

16. Spouses and Former Spouses

None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

None

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None



| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|--------------------------|--|-------------------|----------------------|
|--------------------------|--|-------------------|----------------------|

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

☐

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|---------------------------------------|----------------|-------------------|
|-----------------------|---------------------------------------|----------------|-------------------|

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None

☐

| NAME AND ADDRESS OF GOVERNMENTAL UNIT | DOCKET NUMBER | STATUS OR DISPOSITION |
|---------------------------------------|---------------|-----------------------|
|---------------------------------------|---------------|-----------------------|

None

18. Nature, location and name of business

None

☐

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

| NAME | LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER I.D. NO. | ADDRESS | NATURE OF BUSINESS | BEGINNING AND ENDING DATES |
|------|--|---------|--------------------|----------------------------|
|------|--|---------|--------------------|----------------------------|

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

☐

| NAME | ADDRESS |
|------|---------|
|------|---------|

None

* * * * *

[if completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 10/21/2009

Signature of Debtor s/ Joseph A. Gilbert
Joseph A. Gilbert

Date 10/21/2009

Signature of Joint Debtor s/ Cindy Lou Gilbert
Cindy Lou Gilbert

Form 8
(10/05)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re: Joseph A. Gilbert Cindy Lou Gilbert
Debtors

Case No. _____
Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

- ☐ I have filed a schedule of assets and liabilities which includes debts secured by property of the estate.
- ☐ I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
- ☐ I intend to do the following with respect to the property of the estate which secures those debts or is subject to a lease:

| Description of Secured Property | Creditor's Name | Property will be Surrendered | Property is claimed as exempt | Property will be redeemed pursuant to 11 U.S.C. § 722 | Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c) |
|---|-----------------|------------------------------|-------------------------------|---|--|
| 1. 240 Lincoln, Downers Grove, IL 60515 | Citi Mortgage | | | | X |
| 2. 240 Lincoln, Downers Grove, IL 60515 | U.S. Bank | | | | X |

| Description of Leased Property | Lessor's Name | Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A) |
|--------------------------------|---------------|--|
| 1. | None | X |

s/ Joseph A. Gilbert 10/21/2009

Joseph A. Gilbert
Signature of Debtor Date

s/ Cindy Lou Gilbert 10/21/2009

Cindy Lou Gilbert
Signature of Joint Debtor (if any) Date

Form B1, Exhibit C
(9/01)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

Exhibit "C"

[If, to the best of the debtor's knowledge, the debtor owns or has possession of property that poses or is alleged to pose a threat of imminent and identifiable harm to the public health or safety, attach this Exhibit "C" to the petition.]

In re: **Joseph A. Gilbert**
Cindy Lou Gilbert

Case No.:

Chapter: **7**

Debtor(s)

Exhibit "C" to Voluntary Petition

1. Identify and briefly describe all real or personal property owned by or in possession of the debtor that, to the best of the debtor's knowledge, poses or is alleged to pose a threat of imminent and identifiable harm to the public health or safety (attach additional sheets if necessary):

2. With respect to each parcel of real property or item of personal property identified in question 1, describe the nature and location of the dangerous condition, whether environmental or otherwise, that poses or is alleged to pose a threat of imminent and identifiable harm to the public health or safety (attach additional sheets if necessary):

Official Form 22A (Chapter 7) (04/07)

In re **Joseph A. Gilbert, Cindy Lou Gilbert**

Debtor(s)

Case Number: _____

(If known)

According to the calculations required by this statement:

☐ The presumption arises

☒ The presumption does not arise

(Check the box as directed in Parts I, III, and VI of this statement.)

**CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME
AND MEANS-TEST CALCULATION**

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly, whose debts are primarily consumer debts. Joint debtors may complete one statement only.

Part I. EXCLUSION FOR DISABLED VETERANS

1

If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ **Veteran's Declaration.** By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).

Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION

2

Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.

a. ☐ Unmarried. **Complete only Column A ("Debtor's Income") for Lines 3-11.**

b. ☐ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." **Complete only Column A ("Debtor's Income") for Lines 3-11.**

c. ☐ Married, not filing jointly, without the declaration of separate households set out in line 2.b above. **Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.**

d. ☒ Married, filing jointly. **Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.**

All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.

**Column A
Debtor's
Income**

**Column B
Spouse's
Income**

3

Gross wages, salary, tips, bonuses, overtime, commissions.

\$1,913.66

\$1,756.44

4

Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. **Do not include any part of the business expenses entered on Line b as a deduction in Part V.**

| | | |
|----|--|-----------------------------|
| a. | Gross Receipts | \$ 0.00 |
| b. | Ordinary and necessary business expenses | \$ 0.00 |
| c. | Business income | Subtract Line b from Line a |

\$0.00

\$0.00

5

Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. **Do not include any part of the operating expenses entered on Line b as a deduction in Part V.**

| | | |
|----|---|-----------------------------|
| a. | Gross Receipts | \$ 0.00 |
| b. | Ordinary and necessary operating expenses | \$ 0.00 |
| c. | Rent and other real property income | Subtract Line b from Line a |

\$0.00

\$0.00

6

Interest, dividends, and royalties.

\$0.00

\$0.00

7

Pension and retirement income.

\$0.00

\$0.00

8

Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child or spousal support.

\$0.00

\$0.00

Do not include amounts paid by the debtor's spouse if Column B is completed.

Official Form 22A (Chapter 7) (04/07) - Cont.

2

| | | | | | | |
|---|--|---|-----------------|-----------------|--------|--------|
| 9 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: <table border="1" style="width: 100%;"> <tr> <td style="width: 40%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td style="width: 30%;">Debtor \$ _____</td> <td style="width: 30%;">Spouse \$ _____</td> </tr> </table> | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ _____ | Spouse \$ _____ | \$ | \$ |
| Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ _____ | Spouse \$ _____ | | | | |
| 10 | Income from all other sources. If necessary, list additional sources on a separate page. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Specify source and amount. <table border="1" style="width: 100%;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 65%;">_____</td> <td style="width: 30%;">\$ _____</td> </tr> </table> | a. | _____ | \$ _____ | \$0.00 | \$0.00 |
| a. | _____ | \$ _____ | | | | |
| Total and enter on Line 10. | | | | | | |
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 thru 10 in Column B. Enter the total(s). | \$1,913.66 | \$1,756.44 | | | |
| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A. | \$ 3,670.10 | | | | |

Part III. APPLICATION OF § 707(b)(7) EXCLUSION

| | | |
|----|--|-------------|
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | \$44,041.20 |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>IL</u> b. Enter debtor's household size: <u>2</u> | \$54,979.00 |
| 15 | Application of Section 707(b)(7). Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. <input type="checkbox"/> The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. | |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)

| | | |
|----|---|----|
| 16 | Enter the amount from Line 12. | \$ |
| 17 | Marital adjustment. If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. If you did not check box at Line 2.c, enter zero. | \$ |
| 18 | Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result. | \$ |

Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)

Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)

| | | |
|-----|---|----|
| 19 | National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | \$ |
| 20A | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | \$ |

Official Form 22A (Chapter 7) (04/07) - Cont.

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| | | | | | | | | | | | |
|-----|---|-----------------------------|--|----|----|--|----|----|---|-----------------------------|----|
| 20B | <p>Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Housing and Utilities Standards; mortgage/rental expense</td><td style="width: 30%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by home, if any, as stated in Line 42.</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net mortgage/rental expense</td><td>Subtract Line b from Line a</td></tr> </table> | a. | IRS Housing and Utilities Standards; mortgage/rental expense | \$ | b. | Average Monthly Payment for any debts secured by home, if any, as stated in Line 42. | \$ | c. | Net mortgage/rental expense | Subtract Line b from Line a | \$ |
| a. | IRS Housing and Utilities Standards; mortgage/rental expense | \$ | | | | | | | | | |
| b. | Average Monthly Payment for any debts secured by home, if any, as stated in Line 42. | \$ | | | | | | | | | |
| c. | Net mortgage/rental expense | Subtract Line b from Line a | | | | | | | | | |
| 21 | <p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p> | \$ | | | | | | | | | |
| 22 | <p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p> | \$ | | | | | | | | | |
| 23 | <p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, First Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Transportation Standards, Ownership Costs, First Car</td><td style="width: 30%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42.</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 1</td><td>Subtract Line b from Line a</td></tr> </table> | a. | IRS Transportation Standards, Ownership Costs, First Car | \$ | b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42. | \$ | c. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a | \$ |
| a. | IRS Transportation Standards, Ownership Costs, First Car | \$ | | | | | | | | | |
| b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42. | \$ | | | | | | | | | |
| c. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a | | | | | | | | | |
| 24 | <p>Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Transportation Standards, Ownership Costs, Second Car</td><td style="width: 30%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 2</td><td>Subtract Line b from Line a</td></tr> </table> | a. | IRS Transportation Standards, Ownership Costs, Second Car | \$ | b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 | \$ | c. | Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a | \$ |
| a. | IRS Transportation Standards, Ownership Costs, Second Car | \$ | | | | | | | | | |
| b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 | \$ | | | | | | | | | |
| c. | Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a | | | | | | | | | |
| 25 | <p>Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.</p> | \$ | | | | | | | | | |
| 26 | <p>Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions.</p> | \$ | | | | | | | | | |
| 27 | <p>Other Necessary Expenses: life insurance. Enter average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</p> | \$ | | | | | | | | | |

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| | | | | | | | | | | | | | | |
|---|---|-----------------------------|------------------|----|----|----------------------|----|----|------------------------|----|--|--|-----------------------------|----|
| 28 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 44. | \$ | | | | | | | | | | | | |
| 29 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | \$ | | | | | | | | | | | | |
| 30 | Other Necessary Expenses: childcare. Enter the average monthly amount that you actually expend on childcare- such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. | \$ | | | | | | | | | | | | |
| 31 | Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance or health savings accounts listed in Line 34. | \$ | | | | | | | | | | | | |
| 32 | Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually pay for telecommunication services other than your basic home telephone service—such as cell phones, pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. | \$ | | | | | | | | | | | | |
| 33 | Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32. | \$ | | | | | | | | | | | | |
| Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 19-32 | | | | | | | | | | | | | | |
| 34 | Health Insurance, Disability Insurance and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. | \$ | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 75%;">Health Insurance</td> <td style="width: 20%; text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Disability Insurance</td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Health Savings Account</td> <td style="text-align: center;">\$</td> </tr> <tr> <td colspan="2"></td> <td style="text-align: center;">Total: Add Lines a, b and c</td> </tr> </table> | | a. | Health Insurance | \$ | b. | Disability Insurance | \$ | c. | Health Savings Account | \$ | | | Total: Add Lines a, b and c | \$ |
| a. | Health Insurance | \$ | | | | | | | | | | | | |
| b. | Disability Insurance | \$ | | | | | | | | | | | | |
| c. | Health Savings Account | \$ | | | | | | | | | | | | |
| | | Total: Add Lines a, b and c | | | | | | | | | | | | |
| 35 | Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. | \$ | | | | | | | | | | | | |
| 36 | Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. | \$ | | | | | | | | | | | | |
| 37 | Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. | \$ | | | | | | | | | | | | |
| 38 | Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. | \$ | | | | | | | | | | | | |
| 39 | Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. | \$ | | | | | | | | | | | | |
| 40 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). | \$ | | | | | | | | | | | | |
| 41 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40. | \$ | | | | | | | | | | | | |

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Subpart C: Deductions for Debt Payment

| 42 | <p>Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 30%;">Name of Creditor</th> <th style="width: 30%;">Property Securing the Debt</th> <th style="width: 35%;">60-month Average Payment</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table> <p style="text-align: right;">Total: Add Lines a, b and c</p> | | Name of Creditor | Property Securing the Debt | 60-month Average Payment | a. | | | \$ | \$ | | | | |
|--|---|-------------------------------|--|----------------------------|---------------------------|--|---|----|---|----|--|--|-------------------------------|----|
| | Name of Creditor | Property Securing the Debt | 60-month Average Payment | | | | | | | | | | | |
| a. | | | \$ | | | | | | | | | | | |
| 43 | <p>Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 30%;">Name of Creditor</th> <th style="width: 30%;">Property Securing the Debt</th> <th style="width: 35%;">1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p style="text-align: right;">Total: Add Lines a, b and c</p> | | Name of Creditor | Property Securing the Debt | 1/60th of the Cure Amount | | | | | \$ | | | | |
| | Name of Creditor | Property Securing the Debt | 1/60th of the Cure Amount | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 44 | <p>Payments on priority claims. Enter the total amount of all priority claims (including priority child support and alimony claims), divided by 60.</p> | \$ | | | | | | | | | | | | |
| 45 | <p>Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;">Projected average monthly Chapter 13 plan payment.</td> <td style="width: 40%;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</td> <td style="text-align: center;">X</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td></td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right;">Total: Multiply Lines a and b</td> </tr> </tbody> </table> | a. | Projected average monthly Chapter 13 plan payment. | \$ | b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | X | c. | Average monthly administrative expense of Chapter 13 case | | | | Total: Multiply Lines a and b | \$ |
| a. | Projected average monthly Chapter 13 plan payment. | \$ | | | | | | | | | | | | |
| b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | X | | | | | | | | | | | | |
| c. | Average monthly administrative expense of Chapter 13 case | | | | | | | | | | | | | |
| | | Total: Multiply Lines a and b | | | | | | | | | | | | |
| 46 | <p>Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.</p> | \$ | | | | | | | | | | | | |
| Subpart D: Total Deductions Allowed under § 707(b)(2) | | | | | | | | | | | | | | |
| 47 | <p>Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.</p> | \$ | | | | | | | | | | | | |

| Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION | | |
|---|--|----|
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2)) | \$ |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | \$ |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result | \$ |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | \$ |
| 52 | Initial presumption determination. Check the applicable box and proceed as directed. <div style="margin-top: 5px;"> <input type="checkbox"/> The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. </div> <div style="margin-top: 5px;"> <input type="checkbox"/> The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. </div> <div style="margin-top: 5px;"> <input type="checkbox"/> The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Lines 53 through 55). </div> | |
| 53 | Enter the amount of your total non-priority unsecured debt | \$ |
| 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. | \$ |
| 55 | Secondary presumption determination. Check the applicable box and proceed as directed. <div style="margin-top: 5px;"> <input type="checkbox"/> The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. </div> <div style="margin-top: 5px;"> <input type="checkbox"/> The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. </div> | |

| Part VII. ADDITIONAL EXPENSE CLAIMS | | | | | | | | | | | |
|-------------------------------------|---|----------------|---------------------|----------------|--|--|--|--|------------------------------|----|--|
| 56 | Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. | | | | | | | | | | |
| | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 65%;">Expense Description</th> <th style="width: 30%;">Monthly Amount</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td style="text-align: right;">Total: Add Lines a, b, and c</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table> | | Expense Description | Monthly Amount | | | | | Total: Add Lines a, b, and c | \$ | |
| | Expense Description | Monthly Amount | | | | | | | | | |
| | | | | | | | | | | | |
| | Total: Add Lines a, b, and c | \$ | | | | | | | | | |

| Part VIII: VERIFICATION | |
|-------------------------|---|
| 57 | <p>I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this a joint case, both debtors must sign.)</i></p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> Date: <u>10/21/2009</u> </div> <div style="width: 50%;"> Signature: <u>s/ Joseph A. Gilbert</u> Joseph A. Gilbert, (Debtor) </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> Date: <u>10/21/2009</u> </div> <div style="width: 50%;"> Signature: <u>s/ Cindy Lou Gilbert</u> Cindy Lou Gilbert, (Joint Debtor, if any) </div> </div> |

Income from all other sources (continued)

Official Form 23 (10/06)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re Joseph A. Gilbert Cindy Lou Gilbert,
Debtors

Case No. _____
Chapter 7

**DEBTOR'S CERTIFICATION OF COMPLETION OF INSTRUCTIONAL COURSE CONCERNING
PERSONAL FINANCIAL MANAGEMENT**

Every individual debtor in a chapter 7 or chapter 13 case must file this certification. If a joint petition is filed, each spouse must complete and file a separate certification. Complete one of the following statements and file by the deadline stated below:

☐ I, _____, the debtor in the above-styled
(Printed Name of Debtor)
case hereby certify that on _____ (Date), I completed an instructional course in personal
financial management provided by _____
(Name of Provider)
an approved personal financial management provider.

Certificate No.: _____

☐ I, _____, the debtor in the above-styled case,
(Printed Name of Debtor)
hereby certify that no personal financial management course is required, because of *[Check the appropriate box.]*:
☐ Incapacity or disability, as defined in 11 U.S.C. § 109(h)
☐ Active military duty in a military combat zone; or
☐ Residence in a district in which the United States trustee (or bankruptcy administrator) has
determined that the approved instructional courses are not adequate at this time to serve the additional individuals
who would otherwise be required to complete such courses.

Signature of Debtor: s/ Joseph A. Gilbert
Joseph A. Gilbert

Date: 10/21/2009

Instructions: Use this form only to certify whether you completed a course in personal financial management. (Fed. R. Bankr. P. 1007(b)(7).) Do NOT use this form to file the certificate given to you by your prepetition credit counseling provider and do NOT include with the petition when filing your case.

Filing Deadlines: In a chapter 7 case, file within 45 days of the first date set for the meeting of creditors under § 341 of the Bankruptcy Code. In a chapter 13 case, file no later than the last payment made by the debtor as required by the plan or the filing of a motion for entry of a discharge under § 1328(b) of the Code. (See Fed. R. Bankr. P. 1007(c).)

Official Form 23 (10/06)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re Joseph A. Gilbert Cindy Lou Gilbert,
Debtors

Case No. _____
Chapter 7

**DEBTOR'S CERTIFICATION OF COMPLETION OF INSTRUCTIONAL COURSE CONCERNING
PERSONAL FINANCIAL MANAGEMENT**

Every individual debtor in a chapter 7 or chapter 13 case must file this certification. If a joint petition is filed, each spouse must complete and file a separate certification. Complete one of the following statements and file by the deadline stated below:

☐ I, _____, the debtor in the above-styled
(Printed Name of Debtor)
case hereby certify that on _____ (Date), I completed an instructional course in personal
financial management provided by _____
(Name of Provider)
an approved personal financial management provider.

Certificate No.: _____

☐ I, _____, the debtor in the above-styled case,
(Printed Name of Debtor)
hereby certify that no personal financial management course is required, because of *[Check the appropriate box.]*:
☐ Incapacity or disability, as defined in 11 U.S.C. § 109(h)
☐ Active military duty in a military combat zone; or
☐ Residence in a district in which the United States trustee (or bankruptcy administrator) has
determined that the approved instructional courses are not adequate at this time to serve the additional individuals
who would otherwise be required to complete such courses.

Signature of Debtor: s/ Cindy Lou Gilbert
Cindy Lou Gilbert

Date: 10/21/2009

Instructions: Use this form only to certify whether you completed a course in personal financial management. (Fed. R. Bankr. P. 1007(b)(7).) Do NOT use this form to file the certificate given to you by your prepetition credit counseling provider and do NOT include with the petition when filing your case.

Filing Deadlines: In a chapter 7 case, file within 45 days of the first date set for the meeting of creditors under § 341 of the Bankruptcy Code. In a chapter 13 case, file no later than the last payment made by the debtor as required by the plan or the filing of a motion for entry of a discharge under § 1328(b) of the Code. (See Fed. R. Bankr. P. 1007(c).)

Official Form 24
(10/05)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re **Joseph A. Gilbert Cindy Lou Gilbert**
Debtors

Case No. _____
Chapter **7**

CERTIFICATION TO COURT OF APPEALS
BY ALL PARTIES

A notice of appeal having been filed in the above-styled matter on _____, _____, _____, and _____, *[Names of all the appellants and all the appellees, if any]*, who are all the appellants [and all the appellees] hereby certify to the court under 28 U.S.C. § 158(d)(2)(A) that a circumstance specified in 28 U.S.C. § 158(d)(2) exists as stated below.

Leave to appeal in this matter ☐ is ☒ is not required under 28 U.S.C. § 158(a).

[The certification shall contain one or more of the following statements, as is appropriate to the circumstances.]

Or

Or

[The parties may include or attach the information specified in Rule 8003(f)(3)(C).]

Official Form 24, Cont'd.

Page 2

Signed: *[If there are more than two signatories, all must sign and provide the information requested below. Attach additional signed sheets if needed.]*

s/AndrewMCarter

Attorney for Appellant (or Appellant,
if not represented by an attorney)

Andrew M. Carter

Printed Name of Signer

127 W. Willow Avenue

Wheaton, IL 60187

Address

630-462-8071

Telephone No.

10/21/2009

Date

**United States Bankruptcy Court
Northern District of Illinois
Eastern Division**

In re Joseph A. Gilbert Cindy Lou Gilbert

Case Number
Chapter

7

STATEMENT OF MILITARY SERVICE

The Servicemembers' Civil Relief Act of 2003, Pub. L. No. 108-189, provides for the temporary suspension of certain judicial proceedings or transactions that may adversely affect military servicemembers, their dependents, and others. Each party to a bankruptcy case who might be eligible for relief under the act should complete this form and file it with the Bankruptcy Court.

IDENTIFICATION OF SERVICEMEMBER

- ☐ Self (Debtor, Codebtor, Creditor, Other)
☐ Non-Filing Spouse of Debtor (name) _____
☐ Other (Name of servicemember) _____
(Relationship of filer to servicemember) _____
(Type of liability) _____

TYPE OF MILITARY SERVICE

U.S. Armed Forces (Army, Navy, Air Force, Marine Corps, or Coast Guard) or commissioned officer of the Public Health Service or the National Oceanic and Atmospheric Administration (specify type of service)

- ☐ Active Service since _____ (date)
☐ Inductee - ordered to report on _____ (date)
☐ Retired / Discharged _____ (date)

U.S. Military Reserves and National Guard

- ☐ Active Service since _____ (date)
☐ Impending Active Service - orders postmarked _____ (date)
Ordered to report on _____ (date)
☐ Retired / Discharged _____ (date)

U.S. Citizen Serving with U.S. ally in war or military action (specify ally and war or action)

- ☐ Active Service since _____ (date)
☐ Retired / Discharged _____ (date)

DEPLOYMENT

- ☐ Servicemember deployed overseas on _____ (date)
Anticipated completion of overseas tour-of-duty _____ (date)

SIGNATURE

s/ Joseph A. Gilbert

Joseph A. Gilbert

(print name)

10/21/2009

Date

B 203
(12/94)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re: Joseph A. Gilbert Cindy Lou Gilbert
Debtors

Case No. _____
Chapter 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY
FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | | |
|---|----|---------------|
| For legal services, I have agreed to accept | \$ | <u>500.00</u> |
| Prior to the filing of this statement I have received | \$ | <u>500.00</u> |
| Balance Due | \$ | <u>0.00</u> |

2. The source of compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a) Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b) Preparation and filing of any petition, schedules, statement of affairs, and plan which may be required;
- c) Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d) Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e) [Other provisions as needed]

None

6. By agreement with the debtor(s) the above disclosed fee does not include the following services:

Representation of the debtor in adversary proceedings and other contested bankruptcy matters

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: 10/21/2009

s/AndrewMCarter
Andrew M. Carter, Bar No. 0404578

Law Office of Andrew M. Carter
Attorney for Debtor(s)

**United States Bankruptcy Court
Northern District of Illinois
Eastern Division**

In re Joseph A. Gilbert Cindy Lou Gilbert

Case Number _____

Chapter _____

7

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(Relationship of filer to servicemember) _____
(Type of liability) _____

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☐ Retired / Discharged _____ (date)

DEPLOYMENT

- ☐ Servicemember deployed overseas on _____ (date)
Anticipated completion of overseas tour-of-duty _____ (date)

SIGNATURE

s/ Cindy Lou Gilbert

10/21/2009

Date

Cindy Lou Gilbert

(print name)

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re **Joseph A. Gilbert**
Cindy Lou Gilbert
Debtors.

Case No.

Chapter **7**

Debtor's Statement of Special Circumstances

I hereby certify under penalty of perjury that the Debtor's Statement of Special Circumstances is true, correct and complete to the best of my knowledge.

Dated: 10/21/2009

s/ Joseph A. Gilbert
Joseph A. Gilbert

Dated: 10/21/2009

s/ Cindy Lou Gilbert
Cindy Lou Gilbert

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re **Joseph A. Gilbert**
Cindy Lou Gilbert
Debtors.

Case No.

Chapter **7**

Notice to Trustee of Special Circumstances

Dear

Please be advised that I represent **Joseph A. Gilbert Cindy Lou Gilbert**. According to the calculations required by the Statement of Current Monthly Income and Means Test Calculation, the debtor checked the box on page 1 of the form indicating that a presumption of abuse arises in this matter. To rebut this presumption, I am writing to provide you with information supporting the debtor's claim of special circumstances that justify additional expenses and/or adjustments of current monthly income, and/or to provide documentation for expense items that should be deducted from my client's current monthly income pursuant to § 707(b)(2)(A)(ii)(I).

Adjustments of Current Monthly Income

On Line 12 of Official Form B22A, the debtor stated that his current monthly income is **\$3,670.10**, based on the definition provided in section 101(10A) of the Code. However, this amount includes income that the debtor did not actually have at the time his petition was filed, and which the debtor does not currently have. I am enclosing the Debtor's Statement of Special Circumstances which demonstrates that the debtor's actual monthly income is \$. I am also enclosing copies of my client's recent payment advices showing his actual income.

Additional Expenses

On Line of Official Form B22A, the debtor listed an expense amount of \$ based on the Internal Revenue Service National or Local Standard for .
I am enclosing the Debtor's Statement of Special Circumstances which demonstrates that the debtor's actual monthly expense for this item is \$, and that this expense is necessary and reasonable. I am also enclosing documentation for this expense.

In Part VII of Official Form B22A, the debtor listed the following additional expenses: .
The debtor listed these items as a monthly expense amount of **\$0.00**, though this amount was not deducted from his current monthly income for purposes of determining the § 707(b)(2) presumption. I am enclosing the Debtor's Statement of Special Circumstances which demonstrates that these monthly expenses are required for the health and welfare of the debtor and the debtor's family or for the production of the debtor's income. I am also enclosing documentation for these expense items.

If the additional expenses or adjustments to income referred to above are considered in applying the means test, a presumption of abuse no longer arises in this case. Accordingly, my client requests that in lieu of filing a motion to dismiss or convert this chapter 7 case under § 707(b), you file a statement with the court, for the reasons set forth above, that such a motion is not appropriate. If you are in need of any additional information or documentation, please contact me.

s/AndrewMCarter

Andrew M. Carter
Attorney for Debtor(s)

B 201 (04/09/06)

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Andrew M. Carter

Printed Name of Attorney

s/AndrewMCarter

Signature of Attorney

10/21/2009

Date

Address:

**Law Office of Andrew M. Carter
127 W. Willow Avenue
Wheaton, IL 60187**

630-462-8071

Certificate of the Debtor

We, the debtors, affirm that we have received and read this notice.

Joseph A. Gilbert

Cindy Lou Gilbert

Printed Name(s) of Debtor(s)

Case No. (if known)

Xs/ Joseph A. Gilbert

Joseph A. Gilbert

Signature of Debtor

X s/ Cindy Lou Gilbert

Cindy Lou Gilbert

Signature of Joint Debtor

10/21/2009

Date

10/21/2009

Date

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re **Joseph A. Gilbert
Cindy Lou Gilbert**
Debtors.

Case No.

Chapter **7**

STATEMENT OF MONTHLY GROSS INCOME

The undersigned certifies the following is the debtor's monthly income .

| Income: | Debtor | Joint Debtor |
|--|----------------------------|----------------------------|
| Six months ago | <u>\$ 661.78</u> | <u>\$ 1,580.38</u> |
| Five months ago | <u>\$ 581.76</u> | <u>\$ 1,580.38</u> |
| Four months ago | <u>\$ 583.66</u> | <u>\$ 1,580.38</u> |
| Three months ago | <u>\$ 612.00</u> | <u>\$ 2,484.63</u> |
| Two months ago | <u>\$ 690.76</u> | <u>\$ 1,656.42</u> |
| Last month | <u>\$ 661.78</u> | <u>\$ 1,656.42</u> |
| Income from other sources | <u>\$ 7,692.00</u> | <u>\$ 0.00</u> |
| Total gross income for six months preceding filing | <u>\$ 11,483.74</u> | <u>\$ 10,538.61</u> |
| Average Monthly Gross Income | <u>\$ 1,913.96</u> | <u>\$ 1,756.43</u> |
| Average Monthly Net Income | <u>\$ 1,894.00</u> | <u>\$ 1,744.00</u> |

Attached are all payment advices received by the undersigned debtor prior to the petition date, we declare under penalty of perjury that we have read the foregoing statement and that it is true and correct to the best of our knowledge, information, and belief.

Dated: **10/21/2009**

s/ Joseph A. Gilbert
Joseph A. Gilbert

Debtor

s/ Cindy Lou Gilbert
Cindy Lou Gilbert

Joint Debtor

| | | |
|---|---|---|
| UNITED STATES BANKRUPTCY COURT | | PROOF OF CLAIM |
| Name of Debtor | Case Number | THIS SPACE IS FOR COURT USE ONLY |
| NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503. | | |
| Name of Creditor (The person or other entity to whom the debtor owes money or property): | <input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. | |
| Name and address where notices should be sent: | <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court. | |
| Telephone number: | Last four digits of account number or other number by which creditor identifies debtor: _____ | |
| Check here if this claim <input type="checkbox"/> replaces <input type="checkbox"/> amends a previously filed claim, dated: _____ | | |
| 1. Basis for Claim <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____ </div> <div style="width: 50%;"> <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, Salaries and compensations (Fill out below) Last four digits of SS #: _____ Unpaid compensation for services performed from _____ (date) to _____ (date) </div> </div> | | |
| 2. Date debt was incurred: | 3. If court judgment, date obtained: | |
| 4. Classification of Claim. Check the appropriate box or boxes that best describe your claim and state the amount of the claim at the time case filed. See reverse side for important explanations. | | |
| Unsecured Nonpriority Claim \$ _____ <input type="checkbox"/> Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority. | Secured Claim. <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle </div> <input type="checkbox"/> Other _____ Value of Collateral: \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ <u>0.00</u> | |
| Unsecured Priority Claim. <input type="checkbox"/> Check this box if you have an unsecured claim, all or part of which is entitled to priority. Amount entitled to priority \$ _____ Specify the priority of the claim: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950), * earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5). </div> <div style="width: 50%;"> <input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties of governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) </div> </div> <p style="font-size: small; text-align: center;">*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</p> | | |
| 5. Total Amount of Claim at Time Case Filed: \$ _____ (unsecured) _____ (secured) _____ (priority) _____ (Total) <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges. | | |
| 6. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. 7. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary. 8. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim. | | THIS SPACE IS FOR COURT USE ONLY |
| Date | Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): | |

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In particular types of cases or circumstances, such as bankruptcy cases that are not filed voluntarily by a debtor, there may be exceptions to these general rules.

--- DEFINITIONS ---

Debtor

The person, corporation, or other entity that has filed a bankruptcy case is called the debtor.

Creditor

A creditor is any person, corporation, or other entity to whom the debtor owed a debt on the date that the bankruptcy case was filed.

Proof of Claim

A form telling the bankruptcy court how much the debtor owed a creditor at the time the bankruptcy case was filed (the amount of the creditor's claim). This form must be filed with the clerk of the bankruptcy court where the bankruptcy case was filed.

Secured Claim

A claim is a secured claim to the extent that the creditor has a lien on property of the debtor (collateral) that gives the creditor the right to be paid from that property before creditors who do not have liens on the property.

Examples of liens are a mortgage on real estate and a security interest in a car, truck, boat, television set, or other item of property. A lien may have been obtained through a court proceeding before the bankruptcy case began; in some states a court judgment is a lien. In addition, to the extent a creditor also owes money to the debtor (has a right of setoff), the creditor's claim may be a secured claim. (See also *Unsecured Claim*.)

Unsecured Claim

If a claim is not a secured claim it is an unsecured claim. A claim may be partly secured and partly unsecured if the property on which a creditor has a lien is not worth enough to pay the creditor in full.

Unsecured Priority Claim

Certain types of unsecured claims are given priority, so they are to be paid in bankruptcy cases before most other unsecured claims (if there is sufficient money or property available to pay these claims). The most common types of priority claims are listed on the proof of claim form. Unsecured claims that are not specifically given priority status by the bankruptcy laws are classified as *Unsecured Nonpriority Claims*.

Items to be completed in Proof of Claim form (if not already filled in)

Court, Name of Debtor, and Case Number:

Fill in the name of the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the name of the debtor in the bankruptcy case, and the bankruptcy case number. If you received a notice of the case from the court, all of this information is near the top of the notice.

Information about Creditor:

Complete the section giving the name, address, and telephone number of the creditor to whom the debtor owes money or property, and the debtor's account number, if any. If anyone else has already filed a proof of claim relating to this debt, if you never received notices from the bankruptcy court about this case, if your address differs from that to which the court sent notice, or if this proof of claim replaces or changes a proof of claim that was already filed, check the appropriate box on the form.

1. Basis for Claim:

Check the type of debt for which the proof of claim is being filed. If the type of debt is not listed, check "Other" and briefly describe the type of debt. If you were an employee of the debtor, fill in the last four digits of your social security number and the dates of work for which you were not paid.

2. Date Debt Incurred:

Fill in the date when the debt first was owed by the debtor.

3. Court Judgments:

If you have a court judgment for this debt, state the date the court entered the judgment.

4. Classification of Claim **Secured Claim:**

Check the appropriate place if the claim is a secured claim. You must state the type and value of property that is collateral for the claim, attach copies of the documentation of your lien, and state the

amount past due on the claim as of the date the bankruptcy case was filed. A claim may be partly secured and partly unsecured. (See DEFINITIONS, above).

Unsecured Priority Claim:

Check the appropriate place if you have an unsecured priority claim, and state the amount entitled to priority. (See DEFINITIONS, above). A claim may be partly priority and partly nonpriority if, for example, the claim is for more than the amount given priority by the law. Check the appropriate place to specify the type of priority claim.

Unsecured Nonpriority Claim:

Check the appropriate place if you have an unsecured nonpriority claim, sometimes referred to as a "general unsecured claim". (See DEFINITIONS, above.) If your claim is partly secured and partly unsecured, state here the amount that is unsecured. If part of your claim is entitled to priority, state here the amount not entitled to priority.

5. Total Amount of Claim at Time Case Filed:

Fill in the total amount of the entire claim. If interest or other charges in addition to the principal amount of the claim are included, check the appropriate place on the form and attach an itemization of the interest and charges.

6. Credits:

By signing this proof of claim, you are stating under oath that in calculating the amount of your claim you have given the debtor credit for all payments received from the debtor.

7. Supporting Documents:

You must attach to this proof of claim form copies of documents that show the debtor owes the debt claimed or, if the documents are too lengthy, a summary of those documents. If documents are not available, you must attach an explanation of why they are not available.